

## Options for Implementing Budget Reduction in First Steps Program

This document provides an overview of options being considered to alter the First Steps Program to meet the budget reduction requirement. *These options represent only preliminary ideas and do not reflect any final decisions.* Options could be combined to achieve the savings needed and refocus the program on serving the women at highest risk for poor birth outcomes.

Please send comments by COB on Monday, January 26, 2009 on the proposed ideas below, as well as additional ideas you may have to the DOH First Steps Messages Mailbox at:

[firststepsmessages@doh.wa.gov](mailto:firststepsmessages@doh.wa.gov)

### **Infant Case Management**

#### **Options:**

1. Terminate Infant Case Management. Stop enrollment of new ICM clients and close all open cases by a specified date. This option equals approximately 10% of the budget. Five percent could then be used for maternity support services yet to be defined.
2. Redefine ICM eligibility criteria narrowing enrollment to 50% of its current level. This option would allow us to meet the 5% First Steps budget reduction.

### **Maternity Support Services**

#### **Assumptions:**

- A standardized mechanism to determine risk will be identified.
- Risk factors could be used to screen women into high and low risk groups. These risk factors will be based on Washington state data and evidence as described in literature.

#### **Options related to Services:**

1. Screen all Medicaid eligible women. Serve only women who qualify as high risk according to newly defined risk criteria.
2. Screen all Medicaid eligible women. High risk women receive more services; low risk women receive limited services.

For example:

- High Risk women might be eligible to receive:
  - Screening for risk factors at entry into program, repeated during each trimester of pregnancy, and once postpartum.
  - Care Coordination and Case Management
  - Clinical Interventions & Health Education
- Low Risk women might be eligible to receive:
  - Screening for risk factors at entry into program, possibly repeated during each trimester of pregnancy, and once postpartum.
  - Referral/connection to prenatal care and WIC
  - Limited Health Messages

#### **Options on Reimbursement Rates:**

- No change in rates, but reduce number of units available for high risk/low risk women.
- Increase rates for high risk women, and decrease maximum units.

- Decrease rates for low risk women, and limit units and types of services.
- Specific services delivered in group settings with lower reimbursement for all eligible women.
- Eliminate reimbursement for Tobacco and Family Planning Performance Measures.
- Adjust reimbursement rates.

**Additional Ideas:**

- Allow health messages to be delivered in group settings.
- Do not replace providers that have ceased delivering or scaled down delivery of First Steps in the last two years, unless there is no other provider in the county.